
HOW TO OBTAIN A DEMOLITION PERMIT in Murray City

Apply at the Building Inspection Division in the Public Services Department located at 4646 South 500 West, Murray UT 84123. A packet of information, forms and examples are available.

1. Applicant needs to fill out highlighted portions of the **permit application**. Note: An appropriate **Utah licensed contractor** is required.
2. Applicant needs a form from the **Utah Division of Air Quality [UDAQ]** (contact person = **Anne, 536-4000**). Building Inspection will receive a fax directly from UDAQ with an "ACCEPTED" stamp on it.
3. Applicant needs a completed form from **Salt Lake Valley Health Department [SLVHD]** (contact person = **John Hogan, 801-313-6626**). Applicant will bring a form with approval signatures/SLVHD stamp by **John Hogan** to Building Inspection.
4. Applicant needs **confirmation from Questar to shut off gas line** (contact person = "**Ask-A-Tech**", you will get a "live" person, at **324-3287**). **Applicant must be sure to have the correct address** when they call Questar. Building Inspection will receive a confirmation fax from Questar.
5. Applicant needs to contact **Mary Ann Kirk at 264-2638** to discuss any historical significance of the building. **Historic Preservation Board** review will be required if the building is listed on the historic sites registry. Mary Ann will email Building Inspection approving the demolition.
6. Applicant must meet with the **Operations Division (Water & Sewer Department 270-2440)** to determine whether or not **disconnect fees** will be applied. If it is determined that fees do apply, **the minimum cost will be \$275.00**, with a possibility of additional costs depending on time and materials used when the job is completed. A form indicating the fee or no fee will be returned to Building Inspection.
7. Applicant must speak with **Mike Pfeiffer @ 270-2454** or **Trae Stokes @ 270-2401(Engineering Dept)** to discuss whether a land disturbance permit is required.
8. After all the above approvals and clearances have been granted, a demolition permit will be issued. The Murray **demolition permit fee is \$30.30**.
9. **After permit is issued**, applicant needs to **coordinate with Utility Billing at 264-2626** for **utility disconnections**.

MURRAY CITY

BUILDING INSPECTION DIVISION PERMIT APPLICATION APPLY AT 4646 SOUTH 500 WEST, MURRAY UT 84123

Date of Application		Estimate of Cost	Application # -Assigned by City 10-	
General Description of Project	Total Property Area Acres =	Square Footage of Structure	Project Completion Deposit \$	
Project Address		Zone		
		Type of Improvement (Check One)		
		<input type="checkbox"/> New Residential	<input type="checkbox"/> Remodel	<input type="checkbox"/> Repair
		<input type="checkbox"/> New Commercial Addition	<input type="checkbox"/> Sign	<input type="checkbox"/> Demolish
		<input type="checkbox"/> Change of Use	<input type="checkbox"/> Other	
Subdivision	Lot #			
Owner		<u>CONTACT PERSON:</u> Name: Phone:		
Owners Address				
City, State, ZIP				
Phone #				
Tenant	Phone			
Architect	Phone			
Engineer	Phone			
General Contractor	Phone	BUILDING TYPE & APPROXIMATE AGE:		
Address	State License #			
Electrical Contractor	Phone	Owner Builder Yes <input type="checkbox"/> No <input type="checkbox"/>		
Address	State License #	Affidavit Required		
Mechanical Contractor	Phone	<p>This application becomes void if permits are not issued within 180 days of approval. The permits expire 180 days after work authorized by permit is suspended or abandoned. I hereby certify I have read and examined this application and know the same to be true and correct. All provisions of laws and ordinances governing work will be complied with whether specified herein or not. The granting of a permit does not presume to give authority to violate or cancel the provisions of any state or local law regulating construction or the performance of construction. I make this statement under penalty of perjury.</p> <p>Owner, Contractor, or Authorized Agent _____ Date _____</p> <p>Print Name _____</p>		
Address	State License #			
Plumbing Contractor	Phone			
Address	State License #			

EXTERIOR DEMOLITION

1. Contractor Name: _____

2. Contractor Phone Number: _____

3. Address of Demolition: _____

4. E-Mail to Kevin Potter (Fire): Kpotter@ci.murray.utah.gov
E-Mail to Troy McCombe (Police): Tmccombe@murray.utah.gov
E-Mail to Erik Lindquist (Police): Elindquist@murray.utah.gov

Pre-Demolition Information for Contractors

Submit the required ten-day application to the Utah Department of Air Quality (UDAQ) prior to demolition.

Have the building inspected by a Health Department (HD) registered *Pre-Demolition Building (PBI) Inspector*. HD-registered PBI inspectors are certified asbestos inspectors.

If asbestos or other hazardous materials (HAZMAT) are found, have them removed to a facility permitted to accept the waste.

a. Inspectors must certify proper removal and disposal of:

- i. Mercury thermostats,
- ii. Fluorescent light tubes,
- iii. PCB ballasts,
- iv. Refrigeration units with CFC's,
- v. Containers of hazardous or liquid waste, and
- vi. Asbestos-containing material (ACM).

Complete the HD's PBI form and submit it to the address or fax number on back prior to demolition. Make sure it is signed by the registered inspector.

The completed form must be signed and stamped by an HD representative to be valid. Submit the valid form to the proper city office for permitting.

The HD does not need to perform an inspection of the site prior to demolition. However, failure to obtain HD authorization prior to demolition may be met with enforcement action.

Keep copies of UDAQ forms and city permit on-site.

For renovations that involve ACM or other HAZMAT, remove the materials prior to renovation. See www.airquality.gov for asbestos information and call the HD at 801-313-6700 for HAZMAT disposal sites.

Pre-Demolition Information for Inspectors

1. To register as a *Pre-demolition Building Inspector (PBI)* in Salt Lake County, you must:

- a. Obtain Utah Department of Air Quality (UDAQ) asbestos inspector certification,
- b. Pass a short exam administered by the Health Department (HD),
- c. Provide a copy of your UDAQ certification and two passport quality photos to the HD, and
- d. Submit the PBI fee to the HD.

2. You are responsible for identifying asbestos and other hazardous materials (HAZMAT) at a demolition site.

a. Inspectors must certify proper removal and disposal of:

- i. Mercury thermostats,
- ii. Fluorescent light tubes,
- iii. PCB ballasts,
- iv. Refrigeration units with CFC's,
- v. Containers of hazardous or liquid waste, and
- vi. Asbestos-containing material (ACM).

3. Complete the HD's PBI form and submit it to the address or fax number below prior to demolition. Make sure it is signed by an HD representative before submitting the form for a city permit.

4. Failure to obtain HD authorization prior to demolition may be met with enforcement action.

5. The HD does not need to perform an inspection of the site prior to demolition.

Salt Lake Valley Health Department
788 E Woodoak Lane
Murray, UT 84107

Phone: (801) 313-6626
Fax: (801) 313-6734

SEP-10-2001 MON 10:31 AM DIVISION AIR QUALITY

FAX NO. 8015364099

P. 03



UTAH DIVISION OF AIR QUALITY
150 N 1950 W
Salt Lake City, UT 84114-4820

Postmark Date:
Initials:
Fee Received:
Check Number:

Hand Del.
SD
50.00
19942

RECEIVED
SEP 04 2001
AIR QUALITY

10 DAY NOTIFICATION OF DEMOLITION - no asbestos removed, no intentional burning
b) structures subject to NESHP

[] \$200

Fee Class a) residential units *\$50*

EXAMPLE ONLY

2 Facility Name Residence
Address 348 East Belview County SL Zip Code 84107
City Murray
Part of Facility Involved, (eg. floor #, room #, area etc.) Demolition of entire structure
Age of Facility Unk Size 2050 sq.ft. # of Floors 1
Present use Residence Prior Use Residence

3 Facility Owner/Operator Name Gary Symkoviak
Address Same City Murray State UT Zip Code 84107
Contact Person Same Phone Number 263-2370

4 Demolition Contractor Name Cliff Johnson *Excavations*
Address 648 W. Fine Dr City SLC State UT Zip Code 84119
Contact Person Mark Johnson Phone 266-6965

5 Dates of Demolition
Start Date Sept 15 Ending Date Nov

6 Asbestos Inspection Information
Name of Utah Certified Inspector Ted Diamant Date of Inspection 8/6/01
Name of Utah Certified Asbestos Company T2 Environmental ID Number 2362
Analytical Method used for asbestos analysis EPA-600/M4-82-020 ID Number 281
Is asbestos present? No RACM Was it sampled or assumed? Both

7 Asbestos Containing Material to be left in the facility during demolition, (list types and amounts).

roofing 2000 sq.ft. flooring 450 sq.ft. other _____

8 Description of procedures to be followed in the event that unexpected RACM is found or generated during the project.
Any RACM discovered will be properly abated and disposed by a certified asbestos abatement contractor.

attach additional sheets as necessary
9 I certify that the all the information in this notification is true and correct.

Signature of Owner/Operator Gary Symkoviak

Date 9/4/01

Print name and title of Owner/Operator Gary Symkoviak

OFFICIAL USE ONLY

Date Accepted 9/5/01

Date Rejected _____

Acts #: 760

Reviewers Initials AR

Rejection Comments: _____

ACCEPTED



AR 9/5/01

SALT LAKE VALLEY HEALTH DEPARTMENT

788 E Woodoak Lane, Suite 120

Murray, UT 84107

Phone – (801) 313-6700; Fax – (801) 313-6734

Pre-demolition Building Inspection Form

Circle one: Residential / Business

GENERAL INFORMATION

Address of Demolition, Including City:	Inspection Date:
Property Owner Name and Address:	Property Owner Phone Number:
Demolition Permit Holder Name and Address:	Demolition Permit Holder Phone Number:

INSPECTION RESULTS

	Amount	Condition
Mercury (Hg) Thermostats		
Hg Fluorescent Lights		
PCB Ballasts or Transformers		
Refrigeration Units Containing CFC's		
Containers of Liquid or Hazardous Waste, Including Vehicle Batteries:		
Suspect ACM (Sampled):		
Inspector's Name: (Sign and Print)		Reg. # PBI

FOLLOW-UP INSPECTION RESULTS

Date:	Inspector:
Have all identified items been removed? (Circle one) Yes No None Present	

DISPOSITION OF IDENTIFIED ITEMS

	Name of Disposal or Recycling Facility	Date
Hg Thermostats		
Hg Fluorescent Lights		
PCB Ballasts or Transformers		
Refrigeration Units Containing CFC's		
Containers of Liquid or Hazardous Waste ACM		
Inspector's Signature:		

DO NOT WRITE IN THIS SECTION – FOR DEPARTMENT USE ONLY

Approved: (Circle one) Yes No Approved by:

WATER & SEWER DISCONNECT FEES

NAME: _____ DATE: _____

ADDRESS: _____ PHONE: _____

LOCATION OF WORK: _____

DESCRIPTION OF WORK TO BE DONE:

CERTIFICATION STATEMENT

Certify each that apply:

_____ I understand that by changing the use of the property from residential to commercial, the water service must be brought up to Murray City's minimum specification for water i.e. 1" (inch) copper from the street to the water meter, 1" (inch) yoke and new box if necessary.

_____ Yes, I want the water and sewer services terminated permanently.

_____ No, I do not want the water and sewer services terminated, I intend on using them in the future.

Signature of Person making Certification: _____

DEMO PERMIT AMOUNT: \$ 30.30

WATER & SEWER DISCONNECT FEE AMOUNT: \$ _____
(Minimum \$275.00)

TOTAL FEES FOR DEMO: \$ _____

SIGNED: _____

Danny Astill or Anne vonWeller
(Street, Water & Sewer)